

# Best Available Copy

23-Jan-06 4:26 PM RAMAF4402567453

01462635419

TO: 006189491478 No. 1818 P. 2 P. 8

PTO/SB/41 (09-03)  
Approved for use through 11/30/2006 OMB 0811-0036  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM</b>	Application Number	10/567,519
	Filing Date	February 7, 2006
	First Named Inventor	GIDLIN et al.
	Title	ADJUSTABLE SKEWER GRIPPING etc
	Art Unit	
	Examiner Name	
	Address Bracket Number	6207

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
KENNETH L. MITCHELL	38,673
CHARLES R. RUST	18,716
KARL V. KURPLE	57,440

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number

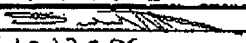
OR

<input checked="" type="checkbox"/> Firm or Individual Name	(WOODLING, KROST AND RUST) KENNETH L. MITCHELL		
Address	6213 CHILLICOTHE ROAD		
City	NORTLAND	State	OHIO
Country	USA	Zip	44084
Telephone	440-256-4160	Fax	440-256-7453

☒ I am the Applicant/Inventor.

☐ Assignment of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/58)

**SIGNATURE of Applicant or Assignee of Record**

Name	Scott John HANTKE
Signature	
Date	1-12-06
Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is in the (and by the USPTO to process) an application. Confidentiality is governed by 38 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 7 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1480, Alexandria, VA 22313-1480. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1480.

If you need assistance in completing the form, call 1-800-PTO-9109 and select option 2.

# Best Available Copy

23-Dec. 4. 2006 2:26PM RMAI4402567453

01482835419

TO:006189481472No.1818 P.3P. 9

PTOGB/1 (28-02)  
Approved for use through 11/30/2006 OMB 0361-0036  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person shall be required to provide information unless it displays a valid OMB control number.

<b>POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM</b>	Application Number	10/567,519
	Filing Date	February 7, 2006
	First Named Inventor	GIBLIN et al
	Title	ADJUSTABLE SKEWER GRIPPING etc.
	Art Unit	
	Examiner Name	
Attorney Docket Number	8287	

I hereby appoint:

☐ Practitioners associated with the Customer Number: [ ]

OR

☒ Practitioner(s) named below:

Name	Registration Number
KENNETH L. MITCHELL	26,673
CHARLES R. RUST	18,718
KARL V. KURPLE	57,440

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number.

OR

☐ The address associated with Customer Number: [ ]

OR

☒ Firm or Individual Name (WOODLING, KROST AND RUST) KENNETH L. MITCHELL

Address 8213 CHELICOTHE ROAD

Art Unit

City KORTLAND State OHIO Zip 44094

Country USA

Telephone 440-256-4150 Fax 440-256-7463

I am the:

☒ Applicant/Inventor

☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/99)

SIGNATURE of Applicant or Assignee of Record

Name	John Graham GIBLIN
Signature	[Signature]
Date	22 RD JUNE 2006
Telephone	44 01482 335419

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.51 and 1.53. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the designated application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 and select option 2.